

07 - 477

(Rev. 5/05)

**FORM TO BE USED BY A PRISONER IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983**

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF DELAWARE**

(1) PAUL SMITH 00142003
 (Name of Plaintiff) (Inmate Number)
DELAWARE CORRECTIONAL CENTER
1181 Paddock ROAD
SMYRNA, DELAWARE 19977
 (Complete Address with zip code)

(2) _____
 (Name of Plaintiff) (Inmate Number)

 (Complete Address with zip code)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

vs.

(1) Reginal Medical First Corr, et al
 (2) DOCTOR(S)
 (3) NURSE(S)
 (Names of Defendants)

(Each named party must be listed, and all names
must be printed or typed. Use additional sheets if needed)

I. PREVIOUS LAWSUITS

- A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

SMITH V. REGINAL MEDICAL FIRST CORRECTIONAL
CASE NUMBER 1:06-CV-431, CASE ASSIGNED JUDGE (GMS)
CASE NUMBER 05-142 JUDGE GREGORY M. STEET.
YEAR FILED 2004 - 2005
MEDICAL MISTAKE(S), & POOR HOUSING
CONDITIONS.

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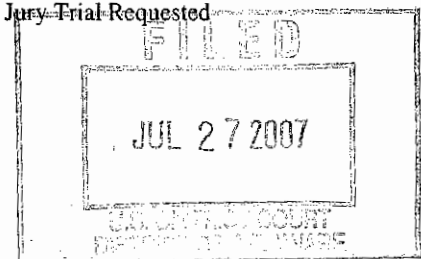
(Case Number)

(to be assigned by U.S. District Court)

CIVIL COMPLAINT

07 - 477

• • Jury Trial Requested



II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes •• No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☒ Yes •• No
- C. If your answer to "B" is Yes:

1. What steps did you take? I CONTACTED WARDEN THOMAS CARROLL, DEPUTY WARDEN BETTY BURRIS, DEPUTY WARDEN DAVID PEARSE,
2. What was the result? ALL IGNORED ME, NO RESULT,

- D. If your answer to "B" is No, explain why not: IS BECAUSE THEY ALL KNOW THE POOR CONDITIONS CNS MEDICAL,

III. DEFENDANTS (in order listed on the caption)

- (1) Name of first defendant: REGINAL MEDICAL FIRST CORRECTIONAL ET AL
 Employed as DOCTORS & NURSE(S) at DELAWARE CORRECTIONAL CENTER
 Mailing address with zip code: 1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977
- (2) Name of second defendant: COMMISSIONER CARL C. DAUBERG
 Employed as COMMISSIONER OF at CORRECTIONS DELAWARE DCC
 Mailing address with zip code: 245 MCKEE ROAD
DOVER, DELAWARE 19904
- (3) Name of third defendant: WARDEN THOMAS CARROLL
 Employed as WARDEN at DELAWARE CORRECTIONAL CENTER
 Mailing address with zip code: 1181 PADDOCK ROAD
SMYRNA, DELAWARE 19977
- (List any additional defendants, their employment, and addresses with zip codes, on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets of paper if necessary.)

1. ON 05-23-07, DCC Medical Staff, Did Refuse Me Medical Care for ASTHMA, High BLOOD PRESSURE, Hip Pain, AND Lower LUMBER Support BRACE, AND REMOVED ALL Medication(S), AND Medical Supplies) I CAME INTO institution WITH. PAIN & Suffering.
2. ON 05-29-07, BEING HOUSED W-Building RECEIVED A Spider Bite, Right Foot Swelling WITH POISONS I PLACED Sick CALL(S) AFTER Sick CALL(S) AND HAVE NOT BEEN SEEN YET, 07-06-07, ON 06-17-07, Reaching for my Clutch(S) FROM Top Bunk CELL #24 I-Tier W-Building DCC Slipped OFF Top Bunk, Hurting my BACK, injured Right KNEE, AND Left ARM, HAVE NOT BEEN SEEN BY Medical YET, 07-06-07, ON 06-23-07 HAVING CHEST PAIN(S), High BLOOD PRESSURE, Nothing DONE YET, Just in PAIN AND Suffering BY Medical
3. RELIEF Staff HERE AT DCC.

(State briefly exactly what you want the Court to do for you. Make no legal arguments. Cite no cases or statutes.)

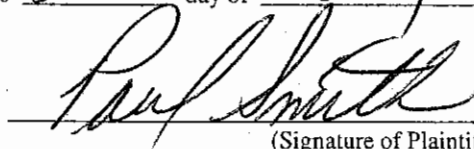
1. Help ME TO WORK ON SOLUTION(S) TO Stop Medical Doctor(S) AND Nurse(S) FROM Refusing ME Medical Treatment(S) FOR my HEALTH CARE, SINCE I BEEN HERE, I BEEN IN PAIN, AND Suffering.

2. I feel DISCRIMINATED AGAINST By Medical DOCTOR(S) AND Medical NURSE(S) HERE AT THE DELAWARE CORRECTIONAL CENTER, THIS HAS BEEN CRUEL AND UNUSUAL PUNISHMENT BY BEING REFUSED MEDICAL CARE FOR MY ILLNESS(S) AND INJURIES.

3. FEDERAL COURT NEEDS TO LOOK INTO THIS MATTER CMS MANAGEMENT, GET QUALIFIED STAFF AND GET RID OF MEDICAL CONTRACTORS AND HIRE NEW EMPLOYEE, AND WORK WITH ME INTO THIS LEGAL MATTER I HAVE WITH REGIONAL MEDICAL, AND REWARD ME ~~RELIEF~~ RELIEF FOR PAIN AND SUFFERING.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 20th day of July, 2007.



(Signature of Plaintiff 1)

(Signature of Plaintiff 2)

(Signature of Plaintiff 3)



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE DEPUTY WARDEN
DELAWARE CORRECTIONAL CENTER
1181 Paddock Road
SMYRNA, DELAWARE 19977
Telephone: (302) 653-9261
Fax: (302) 659-6667

MEMORANDUM

TO: Inmate Paul J. Smith SBI# 00142003 Unit W
FROM: Deputy Warden Burris *Burris*
DATE: June 7, 2007
RE: Inmate letter

Your letter dated May 28, 2007, has been forwarded to Health Services Administrator Rundle for investigation.

Cc: Health Services Administrator Rundle
Deputy Warden Pierce

STATE OF DELAWARE)
) SS
 COUNTY OF KENT)

AFFIDAVIT OF: Paul Smith 142003
 DATED: 07-06-07

AFFIDAVIT

I, PAUL Smith, being first duly sworn deposes and says that the foregoing statement is a true and correct observation of what occurred on the above date herein at/in Medical Hospital DCC located in the Delaware Correctional Center, Smyrna, Delaware, in that I was a part of or witnessed the incident described herein. I would clearly state under penalty of perjury of the laws of the State of Delaware.

Smith v. Reginal Medical
 ON-05-23-07, HAD Medical Supplies with me coming into this PRISON HERE AT DCC, Medical-Medications for ASTHMA, HIP PAIN, AND LUMBER SUPPORT BRACE ON, OR AROUND MY BACK, Medical Staff REMOVED EVERYTHING FROM ME, AND I HAVE NOT RECEIVED ANY of my Medical Supplies I come end with, NOR ANY of my Medications, I PLACED sick call(s) in to Medical BUT THEY HAVE BEEN REFUSING ME TREATMENT(S) AND CARE. ON 05-28-07 PLACED GRIEVANCE(S) AGAINST Medical Doctor(S) AND Nurse(S) for REFUSING ME HEALTH CARE for my ASTHMA, High BLOOD PRESSURE, CHEST PAIN, HIP PAIN, AND LOWER BACK PAIN(S) AND NOTHING IS BEING DONE TOWARDS RECEIVING ANY Medical CARE for my HEALTH CONDITION(S) SINCE I BECAME INCARCERATED HERE DCC IN BEEN PAIN, AND SUFFERING.

Affiant:

Paul Smith
 Signature

PAUL Smith 142003
 Print Name

Delaware Correctional Center
 Smyrna, DE. 19977

SWORN TO AND SUBSCRIBED before me this 6th day of July, 2007.

My Commission Expires: June 14, 2008

Timothy J. Martin
 Notary Public

STATE OF DELAWARE)
) SS
 COUNTY OF KENT)

AFFIDAVIT OF: Paul Smith 140003
 DATED: 07-06-07

AFFIDAVIT

I, Paul Smith, being first duly sworn deposes and says that the foregoing statement is a true and correct observation of what occurred on the above date herein at/in Medical Hospital DCC located in the Delaware Correctional Center, Smyrna, Delaware, in that I was a part of or witnessed the incident described herein. I would clearly state under penalty of perjury of the laws of the State of Delaware. Smith v. Danberg

AS OF 05-28-07, THESE BUILDING ON THIS PRISON COMPOUND HERE AT THE DELAWARE CORRECTIONAL CENTER, HAVE MOLDING, MOLD ON CEILING AND WALL SURFACES, A GROWTH OF FUNGUS FROM DAMP OR DECAYING MATTERS, ALSO LEAD BASE PAINT, OR LEAD MIX COMPOUND, A OIL BASE CAUSING POISON TO MY HEALTH, ALSO HOUSING UNITS DUSTY WITH DUST PARTICLES, SPIDERS AND SPIDER WEBBS HANGING FROM CEILING - WALLS, UNDER HEATER VENTS, BROKEN TILES IN SHOWERS AND IN BATHROOMS WITHIN W-BUILDING, PAINT PILLINGS COMING OFF WALLS EVERYWHERE INSIDE HOUSING UNITS, AND THESE CONDITIONS LIVING UNDER ARE HARMFUL TO MY ASTHMA, STATED BY DCC MEDICAL DOCTOR ON 06-22-07 TIME 9:30 AM, SAID ASTHMA CONDITION HAS GOTTEN WORSE, THE BUREAU OF PRISONS, SHOULD CONTACT THE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL BECAUSE THIS COULD RESULT IN ADDITIONAL ADMINISTRATIVE CIVIL OR CRIMINAL ENFORCEMENT ACTIONS. DWELLING ARE UNSANITARY UNDER DELAWARE LAWS AND REGULATIONS.

Affiant: Paul Smith

Signature

Paul Smith 140003

Print Name

Delaware Correctional Center
 Smyrna, DE. 19977

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Timothy J. Martin
 Notary Public

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AS OF 05-28-07, THESE BUILDING ON THIS PERSONAL COMPOUND HERE AT THE DELAWARE CORRECTIONAL CENTER, HAVE MOLDING, MOLD ON CEILING AND WALL SURFACES, A GROWTH OF FUNGUS FROM DAMP OR DECAYING MATTERS, ALSO LEAD BASE PAINT, OR LEAD MIX COMPOUND, A OIL BASE CAUSING POISON TO MY HEALTH, ALSO HOUSING UNITS DUSTY WITH DUST PARTICLES, SPIDERS AND SPIDER WEBS HANGING FROM CEILING-WALLS, UNDER HEATER VENTS, BROKEN TILES IN SHOWERS AND IN BATHROOMS WITHIN W-BUILDING, PAINT PILLING COMING OFF WALLS EVERYWHERE INSIDE HOUSING UNITS, AND THESE CONDITIONS LIVING UNDER ARE HARMFUL TO MY ASTHMA, STATED BY DCC MEDICAL DOCTOR ON 06-22-07 TIME 9:30 AM, SAID ASTHMA CONDITIONS HAS GOTTEN WORSE, THE BUREAU OF PRISONS, SHOULD CONTACT THE DEPARTMENT OF NATURAL RESOURCES AND ENVIRONMENTAL CONTROL BECAUSE THIS COULD RESULT IN ADDITIONAL ADMINISTRATIVE CIVIL OR CRIMINAL ENFORCEMENT ACTIONS. DWELLING ARE UNSANITARY UNDER DELAWARE LAWS AND REGULATIONS.

Affiant:

Paul Smith
 Signature

PAUL SMITH 142003
 Print Name

Delaware Correctional Center
 Smyrna, DE. 19977

SWORN TO AND SUBSCRIBED before me this 6th day of July, 2007.

My Commission Expires: June 14, 2008

Timothy J. Maults
 Notary Public

STATE OF DELAWARE)
) SS
COUNTY OF KENT)

AFFIDAVIT OF: Paul Smith 142003
DATED: 07-06-07

AFFIDAVIT

I, Paul Smith, being first duly sworn deposes and says that the foregoing statement is a true and correct observation of what occurred on the above date herein at/in W-Building I-24 DCC located in the Delaware Correctional Center, Smyrna, Delaware, in that I was a part of or witnessed the incident described herein. I would clearly state under penalty of perjury of the laws of the State of Delaware. Smith V. Regional Medical

ON 06-17-07, FALL OFF TOP BED CELL #24 I TIER, INJURED LEFT ARM, RIGHT KNEE, AND BACK, I TOLD % STAFF TO CONTACT MEDICAL ABOUT MY FALL, SOMEONE FROM MEDICAL SAID CAN I SMITH WALK?, % STAFF, STATED YES, TELL I'M SMITH, PUT IN SICK CALL. I DID, AND I HAVE NOT BEEN SEEN YET, PAIN, AND SUFFERING.

ON 06-27-07, SPIDER BITE, SWELLING MY RIGHT FOOT, AND I NEED TREATMENT FOR PAIN, AND SWELLING. PLUS MY FOOT COULD HAVE SOME TYPE OF POISON FROM THIS SPIDER BITE, NOT BEEN SEEN YET.

FROM 05-03-07, TO 07-06-07, I PAUL S SMITH 142003, HAS BEEN DISCRIMINATED AGAINST BY MEDICAL STAFF DOCTORS AND NURSES HERE AT THE DELAWARE CORRECTIONAL CENTER NEAR SMYRNA DELAWARE 19977.

Affiant:

Paul Smith
Signature

PAUL SMITH 142003
Print Name

Delaware Correctional Center
Smyrna, DE. 19977

SWORN TO AND SUBSCRIBED before me this 6th day of July, 2007.

My Commission Expires: June 14, 2008

Timothy J. Marts
Notary Public

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COUNTY OF KENT)

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Affiant:

Paul Smith
Signature

PAUL Smith 142003
Print Name

Delaware Correctional Center
Smyrna, DE. 19977

SWORN TO AND SUBSCRIBED before me this 6th day of July, 2007.

My Commission Expires: June 14, 2008

Liniothy J. Martin
Notary Public



STATE OF DELAWARE
OFFICE OF THE GOVERNOR

RUTH ANN MINNER
GOVERNOR

June 13, 2007

Mr. Paul Smith
Delaware Correctional Center
SBI# 142003
1181 Paddock Road
Smyrna, DE 19977

Dear Mr. Smith:

Thank you for contacting Governor Ruth Ann Minner. The Governor is in receipt of your letter, and has asked the office of constituent relations to respond on her behalf. Governor Minner appreciated it when fellow Delawareans take the time to communicate directly on the many issues we face in Delaware.

I have asked the Department of Corrections Commissioner Carl Danberg to review your letter and take the appropriate action. Thank you again for taking the time to write to Governor Minner.

Sincerely,


Keyla Rivero-Rodriguez
Constituent Relations



STATE OF DELAWARE
DEPARTMENT OF CORRECTION
OFFICE OF THE DEPUTY WARDEN
DELAWARE CORRECTIONAL CENTER
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SMYRNA, DELAWARE 19977
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Fax: (302) 659-6667

MEMORANDUM

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FROM: Deputy Warden Burris *Burris*
DATE: June 7, 2007
RE: Inmate letter

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Cc: Health Services Administrator Rundle
Deputy Warden Pierce

IM Paul Smith

SBI# 00142003 UNIT W-I-24

DELAWARE CORRECTIONAL CENTER

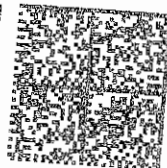
1181 PADDOCK ROAD

SMYRNA, DELAWARE 19977

LEGAL MAIL

Clerk of Court
U.S. District Court
Lockbox 18
344 N. King Street
Wilmington, Delaware
19801

SECRET

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MAILED FROM ZIP CODE 19977
JUL 23 2007

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ATTNEY BOWNS